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990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2011

For	calend	lar year 2011 or tax year beginning , a	and ending				
	me of fou		· · · · · · · · · · · · · · · · · · ·		A Emplo	yer Identification number	
		IC HEALTH MICROBIOLOGY					
_		ITABLE TRUST				-3216399	
		street (or P O box number if mail is not delivered to street address)	Ro	om/suite		one number (see instructions) L-753-8356	
		NW LESTER AVE			34.	L-133-6336	
	•	ALLIS OR 97330			C If exen	nption application is pending, o	heck here
			n of a former public cha	ntv	D 1 Fo	reign organizations, check her	• □
	J.100K C	Final return Amended	•	,	ŀ	reign organizations meeting th	_
		Address change Name cha			1	% test, check here and attach	- 1 1
	Chast t	<u>-</u>			- Kanua	to for adolese status was torre	anted water
_		ype of organization Section 501(c)(3) exempt private a 4947(a)(1) nonexempt charitable trust	e private foundation		1	ite foundation status was term i 507(b)(1)(A), check here	► □
		ket value of all assets at J Accounting method	X Cash Accr	7.29	F If the f	oundation is in a 60-month ten	mination
	-	ear (from Part II, col (c), Other (specify)	Casii Acci	uai		section 507(b)(1)(B), check he	► 1 1
	ne 16) l		ne on cash hasis)				
-	art 1	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
•		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net income	for chantable purposes
	,	the amounts in column (a) (see instructions))	books				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	300				
	2	Check ► X If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	6		6		
_	4	Dividends and interest from secunties	264		264		
Ξ	5a	Gross rents					***************************************
<u> </u>	1 b	Net rental income or (loss)					
9	fa 6a	Net gain or (loss) from sale of assets not on line 10				·············	
ě	7	Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2)			0		
9	1 8	Net_short-term_capital-gam			······································	0	
=	₹ 1.9	Income modification VED					
**************************************	10a	Gross sales less returns & allowance	***************************************				
12	ь	Less Cost of goods sold 12					
4	c	Gross profit or (loss) (attach schedule)			***********		
Š	311	Other income (attach schedule)					
C	12	Total. Add Unes Hilleugh 1	570		270	0	
	13	Compensation of officers, directors, trustees, etc	0				<u> </u>
sesued	14	Other employee salanes and wages					
Ë	15	Pension plans, employee benefits					<u></u>
	16a	Legal fees (attach schedule)	ļ <u> </u>	<u> </u>			
(A)	Ь	Accounting fees (attach schedule) STMT 1	595				595
₹	C	Other professional fees (attach schedule)	<u> </u>				ļ
tra	17	Interest		 			
Ē	18	Taxes (attach schedule) (see instructions) STMT 2	10	 	10	,	<u> </u>
Ë	19	Depreciation (attach schedule) and depletion STMT 3	277		277		I
Ad	20	Occupancy	721				721
ğ	21	Travel, conferences, and meetings	121	 			/21
Operating and Administrative Ex	22	Printing and publications Other expenses (att. sch.) STMT 4	260	 -		 	260
ī	23	Other expenses (att sch) STMT 4 Total operating and administrative expenses.	200	 		 	
ati		Add lines 13 through 23	1,863	{	287	0	1,576
bei	25	Contributions, grifs, grants paid	1,500				1,500
Ō	26	Total expenses and disbursements. Add lines 24 and 25	3,363		287	0	
_	27	Subtract line 26 from line 12.				,	
	a	Excess of revenue over expenses and disbursements	-2,793	1	•		
	ь	Net investment income (if negative, enter -0-)			0		
	6	Adjusted net income (if negative, enter -0-)				0	

03767 05/14/2012 11 55 AM Pg 5 Form 990-PF (2011) PUBLIC HEALTH MICROBIOLOGY 94-3216399 Page 2 End of year Beginning of year Balance Sheets Attached schedules and amounts in the description column Part II should be for end-of-year amounts only (See instructions) (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash--non-interest-bearing 25 25 5,207 2,691 2 Savings and temporary cash investments 2,691 3 Accounts receivable ▶ Less allowance for doubtful accounts Pledges receivable Less allowance for doubtful accounts Grants receivable 5 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (att. schedule) 0 Less allowance for doubtful accounts Inventones for sale or use Prepaid expenses and deferred charges 10a Investments—U.S and state government obligations (attach schedule) SEE STMT 5 12,398 12,398 Investments—corporate stock (attach schedule) 15,496 b Investments-corporate bonds (attach schedule) C Investments—land, buildings, and equipment basis 11 Less accumulated depreciation (attach sch.) 12 Investments-mortgage loans 13 Investments-other (attach schedule) 2,218 14 Land, buildings, and equipment basis 1.999 496 219 Less accumulated depreciation (attach sch.) Other assets (describe ▶ 15 16 Total assets (to be completed by all filers-see the 18,126 15,333 18,212 instructions Also, see page 1, item l) Accounts payable and accrued expenses 17 18 Grants payable Deferred revenue 19 Loans from officers, directors, trustees, and other disqualified persons 20 Mortgages and other notes payable (attach schedule) 21 22 Other liabilities (describe) 0 0 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here ► X and complete lines 24 through 26 and lines 30 and 31. Net Assets or Fund Balances 18,126 15,333 Unrestricted 24 Temporanly restricted 25 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29

Analysis of Changes in Net Assets or Fund Balances Part III 1 Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with 18,126 end-of-year figure reported on prior year's return) -2,793 2 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 15,333 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 15,333 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Form 990-PF (2011)

15,333

15,333

18,126

18,126

30

31

instructions)

Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see

Form 990-PF (2011)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

7 Add lines 5 and 6

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

Form	990-PF (2011) PUBLIC HEALTH MICROBIOLOGY 94-3216399		Pa	ige 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ ☐ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011			
þ	Exempt foreign organizations—tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding eπoneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2012 estimated tax Refunded 11			
	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
_	participate or intervene in any political campaign?	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities	F. 1	1	7.7
C	Did the foundation file Form 1120-POL for this year?	1c		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$			
_				
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
2	on foundation managers \$	2		x
2	If "Yes." attach a detailed description of the activities	-		-
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
,	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	1	x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
-	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
-	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	[
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	OR			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	L
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
•	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"			l
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
		- 00	an Di	F /20111

orm	990-PF (2011) PUBLIC HEALTH MICROBIOLOGY 9	4-3216399			Pa	age 5
Рa	rt VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within	the				
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11	\	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a dis	squalified				
	person had advisory privileges? If "Yes," attach statement (see instructions)			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exer	mption application?		13	X	
	Website address ► N/A					
14	The books are in care of ▶ WILLIAM R. FORD	Telephone no	▶ 541-7	53-	835	6
	1863 NW LESTER AVE					
	Located at CORVALLIS	or ZIP+4	▶ 97330)		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check	here				▶ 🔲
	and enter the amount of tax-exempt interest received or accrued during the year	•	15			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or of	her authority			Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter	r the name of				
	the foreign country					<u></u>
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May E	Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)					ĺ
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Ye	s 🗓 No			É
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	-	_			É
	disqualified person?	Ŭ Ye	s X No s X No			ĺ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Ye	s X No			ĺ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐ Ye	s 🗓 No]	Ė
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					
	the benefit or use of a disqualified person)?	Ye	s X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after					ĺ
	termination of government service, if terminating within 90 days)	Ye	s 🗓 No			
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in the exceptions described in the acts fail to qualify under the exceptions described in the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts fail to qualify under the exceptions described in the acts of	oed in Regulations	4-		1	ŧ
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		ļ
	Organizations relying on a current notice regarding disaster assistance check here		▶ 📋			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted	acts, that	/-			ŧ
	were not corrected before the first day of the tax year beginning in 2011?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation wa	s a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and	<u> </u>				
	6e, Part XIII) for tax year(s) beginning before 2011?	Ye	s 🗓 No			l
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	10.10(-)(0)				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section					ļ
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section	4942(a)(2) to	N/A	2	1	Ī
	all years listed, answer "No" and attach statement—see instructions)	venes boro	N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the y	ears nere				ŧ
_	▶ 20 , 20 , 20 , 20					I
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	☐ Ye	s X No			ŧ
	at any time during the year?		S 25 NO			Ī
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the four disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period app					1
	• •					I
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (Ī
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	ı uı c	N/A	3ь		İ
	foundation had excess business holdings in 2011)	ntable numeses?	74 / 23	4a	 	x
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its characteristic formulation make any investment in a prior year (but after December 31, 1969) that could			70	 	 -
p				4b]	X
	chantable purpose that had not been removed from jeopardy before the first day of the tax year	Deginning III 20117			90-P	F (2011)
						,,

Form 990-PF (2011)

orn	1 990-PF (2011) PUBLIC HEALTH N	MICROBIOLOGY	94-3	216399			Page 6
P	art VII-B Statements Regarding A	activities for Which Form 47	20 May Be Re	equired (conti	nued)		
5a	During the year did the foundation pay or incur	any amount to					
	(1) Carry on propaganda, or otherwise attempt	to influence legislation (section 4945	5(e))?		Yes 🕱 No		1
	(2) Influence the outcome of any specific public	c election (see section 4955), or to ca	arry on,				
	directly or indirectly, any voter registration d	Inve?			Yes 🗓 No		1
	(3) Provide a grant to an individual for travel, si	tudy, or other similar purposes?			Yes X No		
	(4) Provide a grant to an organization other tha	in a charitable, etc., organization des	cribed in				
	section 509(a)(1), (2), or (3), or section 494	0(d)(2)? (see instructions)		Π,	Yes X No		I
	(5) Provide for any purpose other than religious	s, chantable, scientific, literary, or edi	ucational	_	_		
	purposes, or for the prevention of cruelty to	children or animals?		П.	Yes X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	he transactions fail to qualify under th	ne exceptions desc	nbed in	_		
	Regulations section 53 4945 or in a current noti	ice regarding disaster assistance (se	e instructions)?		N/A	5b_	
	Organizations relying on a current notice regard	ling disaster assistance check here			▶ 🗀		
С	If the answer is "Yes" to question 5a(4), does the	ne foundation claim exemption from t	he tax		_		
	because it maintained expenditure responsibility	y for the grant?		N/A	Yes No		
	If "Yes." attach the statement required by Regul	lations section 53 4945-5(d)			_		1
6a	Did the foundation, during the year, receive any	funds, directly or indirectly, to pay p	remiums				
	on a personal benefit contract?				Yes X No		1
ь	Did the foundation, during the year, pay premiu	ms, directly or indirectly, on a person	al benefit contract	?		6b	X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the founda	tion a party to a prohibited tax shelte	r transaction?		Yes X No		1
b	If Yes, did the foundation receive any proceeds	or have any net income attributable	to the transaction?		N/A	7b	
		s, Directors, Trustees, Fou			Paid Employe	es,	
	and Contractors						
1_1	List all officers, directors, trustees, foundatio	n managers and their compensat	ion (see instruction	ons).			
			(b) Title, and average	(c) Compensation	(d) Contributions to] _	
	(a) Name and address		hours per week	(If not paid, enter	employee benefit plans and deferred		pense account, er allowances
			devoted to position	-0-)	compensation		
W	ILLIAM R FORD	CORVALLIS	CO-TRUSTEE				
18	363 LESTER AVE	OR 97330	1.00			<u></u>	0
J₽	ANNA E FORD	CORVALLIS	CO-TRUSTEE				
18	663 LESTER AVE	OR 97330	1.00				0
		ļ				Ì	
						\	
				<u></u>	<u> </u>	<u> </u>	
2	Compensation of five highest-paid employe	es (other than those included on	line 1 —see instru	ıctions). If none,	enter		
	"NONE."						
		ļ	(b) Title, and average		(d) Contributions to	1,5,5,	nanca zasawał
	(a) Name and address of each employee paid mon	e than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred		pense account, er allowances
			devoted to position		compensation	↓	
NC	ONE				l	1	
						 	
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ota	I number of other employees paid over \$50,000					•	. 1 0

Form 990-PF (2011)

Form 990-PF (20	11) PUBLIC HEALTH MICROBIOLOGY	94-3216399	Page 7
Part VIII	Information About Officers, Directors, Trustees, Four and Contractors (continued)	ndation Managers, Highly Paid Em	
3 Five highe	st-paid independent contractors for professional services (see inst	ructions). If none, enter "NONE."	
NONE	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of o	others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
	four largest direct chantable activities during the tax year. Include relevant statistical information her beneficianes served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 SEE S	TATEMENT 7		
2			1,500
-			
3			
4			
Part IX-B	Summary of Program-Related Investments (see ins	tructions)	
	gest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
	lated investments. See instructions		
3			
Total. Add lines	1 through 3	→	

	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	lations,
	see instructions)	,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
	purposes		
а	Average monthly fair market value of secunties	1a	18,619
b	Average of monthly cash balances	16	4,250
C	Fair market value of all other assets (see instructions)	1c	219
d	Total (add lines 1a, b, and c)	1d	23,088
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	23,088
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see]]	
	instructions)	4	346
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	22,742
6	Minimum investment return. Enter 5% of line 5	6	1,137
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	1,137
2a	Tax on investment income for 2011 from Part VI, line 5	1 1	
b	Income tax for 2011 (This does not include the tax from Part VI)	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,137
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,137
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	i i	
	line 1	7	1,137
p.	art XII Qualifying Distributions (see instructions)		
	are Are	······	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,076
b	Program-related investments—total from Part IX-B	1b	_
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,076
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,076
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	n	
	qualifies for the section 4940(e) reduction of tax in those years		

Part XIII	Undistributed Income (see instruction	S) (a)	(b)	(c)	
	debte amount for 2044 for 10 and	(a)	(b)	(c)	1
	Anti (m) for 2044 for 10 1341		1	(0)	(d)
1 Distribu	stable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
line 7					1,13
	ibuted income, if any, as of the end of 2011				
	mount for 2010 only				
	or prior years 20 , 20 , 20				;
	distributions carryover, if any, to 2011				
a From 20	<u> </u>				
b From 20					
c From 20					
d From 20	——————————————————————————————————————				
e From 20	· · · · · · · · · · · · · · · · · · ·	_			
	f lines 3a through e	17,611			
	ing distributions for 2011 from Part XII, S 3,076				
	to 2010, but not more than line 2a				
	to undistributed income of prior years				
• •	on required—see instructions)				
•	I as distributions out of corpus (Election				
	d—see instructions)				Í
•	to 2011 distributable amount				1 12
	ning amount distributed out of corpus	1,939			1,13
	distributions carryover applied to 2011	1,333			<u> </u>
	mount appears in column (d), the same		-		
	must be shown in column (a))	,			
	he net total of each column as				
indicat	ed below:				
a Corpus	Add lines 3f, 4c, and 4e Subtract line 5	19,550			
	ears' undistributed income. Subtract			***************************************	
line 4b f	from line 2b				
c Enter th	ne amount of prior years' undistributed		"	***************************************	,
ıncome	for which a notice of deficiency has				
been is:	sued, or on which the section 4942(a)				
tax has	been previously assessed				
d Subtrac	t line 6c from line 6b Taxable				
amount-	-see instructions				
e Undistri	buted income for 2010 Subtract line				
4a from	line 2a Taxable amount—see				
instructi	ons				
	buted income for 2011 Subtract lines				
	5 from line 1. This amount must be				
	led in 2012			***	(
	s treated as distributions out of corpus				
	y requirements imposed by section				
	1)(F) or 4942(g)(3) (see instructions)				
	distributions carryover from 2006 not				
	on line 5 or line 7 (see instructions)	1,066			
	distributions carryover to 2012.	10.00			
	t lines 7 and 8 from line 6a	18,484			
-	s of line 9				
	from 2007 6,53			1	
	from 2008 4,39	⊣ :		1	
	from 2009 2 , 14 from 2010 3 , 47	_ ,		I	
	from 2010 3,47 from 2011 1,93			1	,

Page 11

94-3216399

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year RACHEL MILLER OSU DEPT OF MICROBIOLOGY NONE CORVALLIS OR 97333 SCHOLARSHIP 1,500 1,500 ▶ 3a Total **b** Approved for future payment N/A **▶** 3b **Total**

(e)

Form 990-PF (2011) PUBLIC HEALTH MICROBIOLOGY

Analysis of Income-Producing Activities

Part XVI-A

Enter gross amounts unless otherwise indicated

94-3216399

Unrelated business income

Excluded by section 512, 513, or 514

Page 12

1	Program ser	vice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	a						
			ļ	 			
				<u> </u>			
	e						
	f						
_	-	d contracts from government agencies	<u> </u>		ļ		
	-	dues and assessments			1		
		avings and temporary cash investments			14	6	
		d interest from securities		 	14	264	
5		come or (loss) from real estate			ļ		·
		anced property	 		}		
_		-financed property	\	 	 -		
		come or (loss) from personal property			├		
	Other investi		 		 		
	-) from sales of assets other than inventory		 	 		
		or (loss) from special events			 _		
		or (loss) from sales of inventory	<u> </u>	<u> </u>	 		
11		ue a			 		
			ļ	 	 		
				 	├		
	<u> </u>			 	 		
	e	1 -1 (1) (1)	 	 			
		d columns (b), (d), and (e)	L	0	'L	270	
		ne 12, columns (b), (d), and (e)				13 _	270
		n line 13 instructions to verify calculations)					
	art XVI-B	Relationship of Activities to the Ac					
	Line No. ▼	Explain below how each activity for which income is					,
		NO SOLICITATIONS OR CALLS					
		OF THE CERTIFIED PUBLIC I					
_		SAN FRANCISCO RETIRED WIT			NO	OF	
_		APPLICATIONS WERE APPROVE			NO		
		APPLICATIONS WERE APPROVE	ED FOR P	WARD.			
_		THE ELEANOR G. FORD MEMOR	STAT SCI	OT ADOUTD W	AC AL	APDED TO	
		MS. RACHEL MILLER BY THE					
_		DEPARTMENT OF MICROBIOLOG					
		SHE IS, OF COURSE, AN OUT					 _
		WITHOUT THIS SCHOLARSHIP					
		TIME COMPLETING HER STUD					
		PROVIDE JUNIORS MAJORING					
_		ASSISTANCE TOWARD AN UND					
		FUTURE CAREERS IN THE ARI				0001011	
_		TOTORE CRICEDIO IN THE REC	<u> </u>	<u> </u>			
		<u> </u>					
							
							
							
				·			
							
							
							Form 990-PF (2011)

Page	1	3

тd	ist VAII	_	_	ISIGIS IU AIIU	i iralisacilor	is and Relationship	5 TTILLI HOLICHAILADIC			
1	Did the orga			any of the follow	ving with any other	er organization described			Yes	No
	in section 5	01(c) of the Code (other	than section 5	501(c)(3) organiza	ations) or in section	on 527, relating to political				
	organization	15 ⁷								É
а	Transfers fr	om the reporting founda	ition to a nonch	naritable exempt	organization of				,	É
	(1) Cash							1a(1)		X
	(2) Other a	ssets						1a(2)		X
b	Other trans	actions							-	Ė
	(1) Sales o	f assets to a noncharital	ble exempt org	janization				1b(1)		X
	•				1			1b(2)		X
	• •			•			:	1b(3)		X
		•						1b(4)		X
	Exempt Organizations In the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(d) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a nonchanitable exempt organization of (1) Cash (2) Other assets Other transactions (3) Purchases of assets to a nonchanitable exempt organization (3) Purchases of assets to a nonchanitable exempt organization (3) Purchases of assets to a nonchanitable exempt organization (3) Rential of facilities, equipment, or other assets (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations Sharing of facilities, equipment, mailing lists, other assets, or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received to the received of the protection of the sharing arrangement, show in column (g) the value of the goods, other assets, or services received (g) time to goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services received (g) time to goods, other assets, or services received (g) time to goods, other assets, or services received (g) time to goods, other assets, or services received (g) time to goods, other assets, or services given to goods, other assets, or services given to goods, goods, other assets,				1b(5)		X			
_	Exempt Organizations Obt the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash (2) Other assets Cither transactions (3) Rental of facilities, equipment, or other assets (4) Purchases of assets from a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations Sharing of facilities, equipment, mailing lists, other assets, or paid employees Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule Column (6) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services received (c) have any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services received (c) have any particular and statements, and to the least of my knowledge and some particular and particular and particular and statements, and to the least of my knowledge and some particular and effective transaction of preparer (other than tappayer) is based on all inf					1b(6)		X		
	-	• •	-	. ,	• •	(h) abauld always about th	o for module	1c	L	
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		•	-							
		T						angemen	nts	
N/I	A					 				
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		<u> </u>	L							
		<u> </u>	 			<u></u>				
		ļ								
		 	 							
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	described in	n section 501(c) of the Complete the following sch	ode (other tha	ın section 501(c)((3)) or in section (527?		Ye	es X] No
		(a) Hame or organization	+	(a) Type of o	organization	 	c) Description of relationship			
	.,,									
				· · · · · · · · · · · · · · · · · · ·						
	Under pe	nailities of perjury. I declare that not complete. Declaration of pro-	it I have examined reparer (other than	this return, including taxpayer) is based o	accompanying sched	ules and statements, and to the b	est of my knowledge and belief, it is	true,		
Sigr			0 -	, ,			May the IRS discumble with the preparer (see instructions)	show <u>n b</u> e		No
Her	e 🖊	Millan	41. TO	tod_	5					
	Sign	ature of officer or trustee			Date	Title	<u> </u>			
	ľ	ype preparer's name			Preparer's signatur	e	Date		Check	
Paid	l	UPD I MOOOURY	.		LLOSLA	us McCoss	a CDA las	. /	self-em	ployed
•				WAN C AC	SCOCTAMES		7, CYH 05/14			
USB (·) TIE		09 <u>2</u> 295		
	Firm's		IY, OR	97321-22				-92		
		ALL PARTY	, OA	J, JEL-22			Phone no 341			334

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

2011

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service

(99) See separate instructions.

► Attach to your tax return

Name(s) shown on return

PUBLIC HEALTH MICROBIOLOGY CHARITABLE TRUST

identifying number 94-3216399

	ess or activity to which this form relates								
	NDIRECT DEPRECIAT								
P	ert I Election To Exper		-		_				
	Note: If you have a		<u>, complete Part</u>	V before you c	<u>omple</u>	te Part	<u> </u>		
1	Maximum amount (see instructions	•						1	500,000
2	Total cost of section 179 property	,	•					2	
3	Threshold cost of section 179 prop	•	•	tructions)				3	2,000,000
4	Reduction in limitation Subtract lin		•					4	_
5	Dollar limitation for tax year Subtract lin		less, enter -0- If mam	ed filing separately, se	e instru	ctions		5	
<u>6</u>	(a) Description	on of property		(b) Cost (business use or	nly)	(c)	Elected cost		
7	Listed property Enter the amount				_7				
8	Total elected cost of section 179 p		• • •	6 and 7				8	
9	Tentative deduction. Enter the sm							9	
10	Carryover of disallowed deduction	•						10	
11	Business income limitation Enter			•	see ins	tructions)		_11	
12	Section 179 expense deduction A	•		nan line 11				12	
13	Carryover of disallowed deduction				13				
	: Do not use Part II or Part III below			 			···		
	art II Special Depreciat					ude liste	d proper	ty) (\$	See instructions)
14	Special depreciation allowance for		ner than listed prope	rty) placed in service	æ				
	during the tax year (see instruction	•						14	
15	Property subject to section 168(f)(•						15	
16	Other depreciation (including ACR		الماما الماما	4.1.0				16	
	art III MACRS Deprecia	tion (no not incit			ctions	.)			
47	MACDS deductions for social plan		Section						277
17 40	MACRS deductions for assets place	-						17	
18	If you are electing to group any assets placed	Assets Placed in Se				ral Dans	eistis - Su		
		(b) Month and year	(c) Basis for depreca		T	nai Depie	Claudii Sy	Stem	
	(a) Classification of property	placed in service	(business/investment u	ise	(e) (Convention	(f) Metho	od	(g) Depreciation deduction
19a	3-year property		0,11/ 000 11/01/00/10		\vdash		 		
b	5-year property	1					 	-	
	7-year property	1			\vdash		 		
d		1					 	\neg	
е	15-year property	1			1			$\neg \neg$	
f	20-year property	1			\dagger		 		
q		1		25 yrs	1		S/L		
	Residential rental			27 5 yrs		MM	S/L		
	property			27 5 yrs		MM	S/L		
ī	Nonresidential real			39 yrs	1 -	MM	S/L		
	property			1 00 1.5	T	MM	S/L		
	Section C—A	ssets Placed in Sen	rice During 2011 Ta	ax Year Using the	Altern			vstem	
20a	Class life		1		1		S/L	1	<u> </u>
	12-year	1		12 yrs	1		S/L		
	40-year			40 yrs	1	MM	S/L		
	art IV Summary (See ins	tructions)	<u> </u>						
<u></u>	Listed property. Enter amount from							21	
22	Total. Add amounts from line 12, i		nes 19 and 20 in colu	ımn (n) and line 21	Enter	here	•		
	and on the appropriate lines of you							22	277
23	For assets shown above and place		-						4//
	portion of the basis attributable to	•	your, orner		23			Ī	,
						<u> </u>			

5/14/2012 11:55 AM Page 1 Adjusted Net 595 595 Income 1, Charitable Charitable Purpose Purpose Ś Net Investment 197 80 277 Income Adjusted Adjusted Net S Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees 197 80 277 Current Year Depreciation Statement 3 - Form 990-PF, Part I, Line 19 - Depreciation Statement 2 - Form 990-PF, Part I, Line 18 - Taxes ٠ Investment Investment S Ŋ Life Federal Statements Net Method 595 595 Total Total 1,423 200DB 299 200DB Prior Year Depreciation **Description** S 03767 Public Health Microbiology 2,218 1,719 499 INDIRECT ACCOUNTING FEES INDIRECT TAXES/LICENSES Cost Basis COMPUTER AND SOFTWARE Description Description FYE: 12/31/2011 2/01/07 8/22/10 Acquired Date TOTAL 94-3216399 TOTAL TOTAL

<u> </u>	1			
5/14/2012 11:55 AM Page 2		Charitable Purpose	\$ 250 10 \$ 260	4
	Expenses	Adjusted Net	s s	
Federal Statements	990-PF, Part I, Line 23 - Other Expenses	Net Investment	\$	
Federal S	Statement 4 - Form 990-PF, F	Total	\$ 250	
03767 Public Health Microbiology 94-3216399 FYE: 12/31/2011	State	Description	EXPENSES DUES BANK FEES TOTAL	

03767 Public Health Microbiology 94-3216399 FYE: 12/31/2011	Federal Statements	ements		5/14/2012 11:55 AM Page 3
Statement 5	Statement 5 - Form 990-PF, Part II, Line 1	Part II, Line 10b - Corporate Stock Investments	k Investments	
Description HEWLETT PACKARD	Beginning of Year	Fnd of Year	Basis of Valuation	Fair Market Value
CROSOFT CORP	5,011 \$ 12,398	5,011 \$ 12,398	COST	5, 192
Statement 6 -	Statement 6 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment	4 - Land, Building, a	nd Equipment	
Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
	\$ 496	\$ 2,218	\$ 1,999	w w
				C u

03767 Public Health Microbiology 94-3216399

FYE: 12/31/2011

Federal Statements

5/14/2012 11:55 AM Page 4

Statement 7 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

Description

UNDER THE FOUNDATION'S PRIMARY PURPOSE, NO GRANTS WERE AWARDED DURING 2011. AN ADDITIONAL CONTRIBUTION TO THE ELEANOR G FORD MEMORIAL SCHOLARSHIP WAS MADE TO INCREASE THE ENDOWMENT AT OREGON STATE UNIVERSITY IN THE AMOUNT OF \$1,500.

03767 Public Health Microbiology 94-3216399

Federal Statements

5/14/2012 11:55 AM

Page 5

FYE: 12/31/2011

Statement 8 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

RECIPIENTS MUST BE STUDENTS OF MICROBIOLOGY AT OREGON STATE UNIVERSITY

03767 Public Health Microbiology 94-3216399

FYE: 12/31/2011

Federal Statements

5/14/2012 11:55 AM Page 1

Direct Public Support

Contributor	Cash Contribution	Noncash Contribution
	300	
TOTAL	300	0

03767 Public Health Microbiology 94-3216399

Federal Statements

5/14/2012 11:55 AM

Page 2

FŸE: 12/31/2011

Taxable Interest on Investments

Description	Amount	Unrelated Exclusion Postal US Business Code Code Code Obs (\$ or %)
CENTRAL WILLAMETTE CU	\$	6 14
TOTAL	\$	6

Taxable Dividends from Securities

Description	 Amount	Unrelated Business Code	Exclusion Code	US Obs (\$ or %)
USAA FEDERAL SAVINGS BANK	\$ 264		14	
TOTAL	\$ 264			